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CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)

Applicant(s): **Larry E. Morton**

Docket No.

901775-1001

Application No.

10/673,998

Filing Date

9/11/2003

Examiner

Mendoz, Jr. Jorge

Group Art Unit

2609

Invention: **CENTRAL AUTOMATED TRANSMISSION SYSTEM FOR BROADCASTING AND METHOD OF OPERATING**

I hereby certify that this Petition for Extension of Time, Amendment Transmittal Letter, Amendment

(Identify type of correspondence)

is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. 1-571-273-8300)

on January 25, 2008

(Date)

Clarissa Arellano

(Typed or Printed Name of Person Signing Certificate)

(Signature)



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P18/REV02

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AMENDMENT TRANSMITTAL LETTER (Small Entity)					Docket No. 901775-1001	
Applicant(s): Larry E. Morton						
Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.	
10/673,998	9/11/2003	Mendoza, Jr. Jorge	38406	2609	2801	
Invention: CENTRAL AUTOMATED TRANSMISSION SYSTEM FOR BROADCASTING AND METHOD OF OPERATING						
COMMISSIONER FOR PATENTS:						
Transmitted herewith is an amendment in the above-identified application.						
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27						
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	53 -	41 =	12	x \$25.00	\$300.00	
INDEP. CLAIMS	8 -	6 =	2	x \$105.00	\$210.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$510.00	
<input type="checkbox"/> No additional fee is required for amendment. <input checked="" type="checkbox"/> Please charge Deposit Account No. 50-0856 in the amount of \$510.00 <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0856 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 Signature Michael A. O'Neil, P.C. Michael A. O'Neil 5949 Sherry Lane, Suite 820 Dallas, TX 75225			Dated: January 25, 2008 <div style="border: 1px solid black; padding: 5px;"> I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on January 25, 2008. (Date)  Signature of Person Mailing Correspondence Clarissa Arellano Typed or Printed Name of Person Mailing Correspondence </div>			
CC:						